FORM D 1113960



# SECURITIES AND EXCHANGE COMMISSION UNITED STATES Washington, D.C. 20549

OMB Number: Expires:

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OMB APPROVAL

## FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

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Prefix		Serial
<i>r</i>		
DAT	E RECEIV	ED

Name of Offering ( check if this is an an	nendment and name	has changed, and inc	licate change.	)		
Series AA Preferred Stock Offering	g and Sale					
Filing Under (Check box(es) that apply):	☐ Rule 504	■ Rule 505	■ Rule 5	06 C	☐ Section 4(6)	□ ULOE
Type of Filing: $\blacksquare$ New Filing $\square$ A	mendment					
	A. BASIC	IDENTIFICATIO	N DATA			
1. Enter the information requested about the	issuer					
Name of Issuer ( check if this is an amount	endment and name h	as changed, and indi	cate change.)			
Steeleye Technology, Inc.						
Address of Executive Offices	(Number a	nd Street, City, State	, Zip Code)	Telephone	e Number (Includ	ling Area Code)
2660 Marine Way, Mountain View,	CA 94043			650-318	-0108	
Address of Principal Business Operations	(Number a	nd Street, City, State	, Zip Code)	Telephone	e Number (Includ	ling Area Code)
(if different from Executive Offices) Sam	ie					
Brief Description of Business				•		
Software Development and Marke	ting					
Type of Business Organization						
☑ corporation ☐ limited partr	ership, already form	ned 🗆 other (	please specify	·):		
☐ business trust ☐ limited partr	ership, to be formed	l				ROCESSED
		Month Year				
Actual or Estimated Date of Incorporation or	Organization:	1 1 9 9	🗷 Actu	al 🗆 E:	stimated	DEC 2 6 2002
Jurisdiction of Incorporation or Organization		J.S. Postal Service at N for other foreign j		r State:	DE	THOMSON FINANCIAL

### **GENERAL INSTRUCTIONS**

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

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Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

	A. BASIC IDENTI	FICATION DATA		
<ul> <li>Enter the information requested for the fe</li> <li>Each promoter of the issuer, if the issuer</li> <li>Each beneficial owner having the pow the issuer;</li> <li>Each executive officer and director of</li> </ul>	uer has been organized within ver to vote or dispose, or dire corporate issuers and of corp	ect the vote or disposition of		
• Each general and managing partner of Check Box(es) that Apply:   Promoter	Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or
Full Name (Last name first, if individual)				Managing Partner
Fitzgerald, James				
Business or Residence Address (Number and	Street City State Zin Code	`		
2660 Marine Way, Mountain View,	•	,		
Check Box(es) that Apply: ☑ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				6-6-
Drawdy, Channier				
Business or Residence Address (Number and	Street, City, State, Zip Code	)		
41552 Apricot Lane, Fremont, CA 9	4539			
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Copeland, Eric				
Business or Residence Address (Number and	Street, City, State, Zip Code	)		
2494 Sand Hill Road, Suite 200, Me	nlo Park, CA 94025			
Check Box(es) that Apply:   Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Rothrock, Ray.				
Business or Residence Address (Number and	Street, City, State, Zip Code	)		
2494 Sand Hill Road, Suite 200, Me	nlo Park, CA 94025		_	
Check Box(es) that Apply: 🗵 Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Mason III, James Howard				
Business or Residence Address (Number and	Street, City, State, Zip Code	)		
726 Beech Street, Redwood City, C	A 94063			
Check Box(es) that Apply:   Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Intel 64 Fund, LLC			•	
Business or Residence Address (Number and	•	)		
2200 Mission College Blvd., Santa	Clara, CA 95052			· · · · · · · · · · · · · · · · · · ·
Check Box(es) that Apply: ☐ Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

2494 Sand Hill Road, Menlo Park, CA 94025

**Venrock Associates** 

Check Box(es) that Apply: ☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or
Full Name (Last name first, if individual)				2.000 L
Venrock Associates II, L.P.				
Business or Residence Address (Number and				
2494 Sand Hill Road, Menlo Park, C	A 94025			
Check Box(es) that Apply: ☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Massey Burch Venture Fund II			<del>, , , , , , , , , , , , , , , , , , , </del>	
Business or Residence Address (Number and S	Street, City, State, Zip Code)			
One Burton Hills Blvd., Suite 350, N	lashville, TN 37215			
Check Box(es) that Apply:   Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Berry, Kevin				
Business or Residence Address (Number and S	Street, City. State, Zip Code)		***************************************	
2660 Marine Way, Mountain View, C	A 94043			
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	<b>☒</b> Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Jones, Harvey C.				
Business or Residence Address (Number and S	Street, City, State, Zip Code)			
2121 Waverly Street, Palo Alto, CA	94301			
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	<b>■</b> Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Hook, David				
Business or Residence Address (Number and S	Street, City, State, Zip Code)	,		
One Lincoln Centre, Suite 1550 540	0 LBJ Freeway, Dallas	, TX 75240		
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	Executive Officer	■ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Adams, Paul				
Business or Residence Address (Number and S	Street, City, State, Zip Code)			
2660 Marine Way, Mountain View, C	A 94043			
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	<b>■</b> Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Earthman, William				
Business or Residence Address (Number and S	Street, City, State, Zip Code)			
One Burton Hills Blvd., Suite 350, N	ashville, TN 37215			
Check Box(es) that Apply:  Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Ellery, Suzan				
Business or Residence Address (Number and S	Street, City, State, Zip Code			

PO Box 160, 10501 Highway 128, Booneville, CA

B. INFORMATION ABOUT OFFERING		
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?  Answer also in Appendix, Column 2, if filing under ULOE.	Yes	s No <b>⊭</b>
2. What is the minimum investment that will be accepted from any individual?	\$	<u>N/A</u>
3. Does the offering permit joint ownership of a single unit?	Yes	
Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any	X	
commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.		
Full Name (Last name first, if individual)  N/A		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
(Check "All States" or check individual States)		☐ All States [ ID ]
[IL][IN][IA][KS][KY][LA][ME][MD][MA][MI][MN][		
[MT][NE][NV][NH][NJ][NM][NY][NC][ND][OH][OK][RI][SC][SD][TN][TX][UT][VT][VA][WA][WA][WV][WI][		-
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	1	☐ All States
[AL][AK][AZ][AR][CA][CO][CT][DE][DC][FL][GA][		[ ID ]
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [		
[RI][SC][SD][TN][TX][UT][VT][VA][WA][WV][WI][		
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  (Check "All States" or check individual States)	1	☐ All States
		] [ ID ]
[IL][IN][IA][KS][KY][LA][ME][MD][MA][MI][MN][MT][NE][NV][NH][NJ][NM][NY][NC][ND][OH][OK][		
[RI][SC][SD][TN][TX][UT][VT][VA][WA][WV][WI][		
(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)		

	Type of Security	Aggregate Offering Price	Amou	ınt Already Sold
	Debt	\$	\$	
	Equity	\$ 1,600,000**	\$	1,176,307*
	□ Common ☑ Preferred*			
	Convertible Securities (including warrants)	\$	\$	
	Partnership Interests	\$	\$	
	Other (Specify _)	\$	\$	
	Total	\$ 1,600,000**	\$	1,176,307*
	Answer also in Appendix, Column 3, if filing under ULOE.			
	Answer also in Appendix, Column 3, it filling under OLOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Doll	ggregate ar Amount Purchases
	Accredited Investors	11	\$	1,176,307*
	Non-accredited Investors	0	\$	
	Total (for filings under Rule 504 only)		\$	
	Answer also in Appendix, Column 4, if filing under ULOE.			
	securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.	Type of	Doll	ar Amount
	Type of offering	Security	•	Sold
	Rule 505		\$	•
	Regulation A		.%	
	Regulation A		*—	
	Rule 504		\$	
			\$ \$	
4.	Rule 504  Total		\$ \$	
4.	Rule 504	X	\$ \$	
4.	Rule 504		\$	(
4.	Rule 504  Total  a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees	×	\$	40,00
4.	Rule 504  Total	×	\$	
4.	Rule 504  Total  a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees  Printing and Engraving Costs.  Legal Fees.	×	\$\$ \$\$	40,00
4.	Rule 504  Total  a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees  Printing and Engraving Costs.  Legal Fees  Accounting Fees	X	\$\$ \$\$ \$\$	40,00
4.	Rule 504  Total	× × ×	\$\$ \$\$ \$\$ \$\$	40,00

	b. Enter the difference between the aggregation 1 and total expenses furnished in respect the "adjusted gross proceeds to the issuer."		ice is				\$.	1,558,700
5.	Indicate below the amount of the adjusted gross for each of the purposes shown. If the amount and check the box to the left of the estimate. adjusted gross proceeds to the issuer set forth in	for any purpose is not known, furnish an es The total of the payments listed must equ	imate		Payments to Officers, Directors, & Affiliates			Payments To Others
	Salaries and fees		×	\$-	0	×	\$-	0
	Purchase of real estate		×	\$-	0	×	\$-	0
	Purchase, rental or leasing and installation	of machinery and equipment	×	\$-		×	\$-	0
	Construction or leasing of plant buildings a	and facilities	×	\$-	0	×	\$-	0
	Acquisition of other businesses (including offering that may be used in exchange for t pursuant to a merger)		×	\$-	0	. 🗷	\$	0
	Repayment of indebtedness		×	\$-	0	×	\$-	0
	Working capital		×	\$-	0	×	\$	1,558,700
	Other (specify):		×	\$-	0	×	\$-	0
			×	\$-	0	. 🗷	\$.	0
			×	\$-	0	×	\$-	1,558,700
	Total Payments Listed (column totals adde	d)			<b>x</b> \$	1,5	58,	700
		D. FEDERAL SIGNATURE						
sigi	issuer has duly caused this notice to be signed bature constitutes an undertaking by the issuer to ormation furnished by the issuer to any non-accre	furnish to the U.S. Securities and Exchange	Con	mi	ssion, upon writt			
Issu	er (Print or Type)	Signature				Date	•	
St	eeleye Technolgy, Inc.	1 /le Bem	_			12	//	7/02
Na	ne of Signer (Print or Type)	Title of Signer (Print or Type)						
K	evin Berry	Chief Financial Officer V						